Application or Docket Number

Effective December 8, 2004									10/57388/				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
U.S. NATIONAL STAGE FEES						•		RATE	FEE'		RATE	FEE	
BASIC FEE							BA	SIC FEE		OR	BASIC FEE	300	
EXAMINATION FEE							EX	AM. FEE			EXAM. FEE	200	
SEARCH FEE							SE	ARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 =	X	\$ 125 =			X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			36	minus 20 =	· /6	, ,] [,	⟨\$ 25 =		OR	X \$ 50 =	800	
INDEPENDENT CLAIMS			3	minus 3 =	*		X	\$ 100 =		OR	X \$ 200 =	800	
MUL	TIPLE DEPENI	DENT CLAIM PR	ESENT				1	\$ 180 =		OR	+ \$ 360 =		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1700	
03	3-29-00	(Column 1) CLAIMS REMAINING	AMENE	DED - PAR	mn 2) IEST	·· (Column 3)] [SMALL E	ADDI-	OR	OTHER	NTITY ADDI-	
AMENDMENT A		AFTER AMENDMENT	ļ	PREVIO PAID		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	36	Minus	- 2	0	= 16		(\$ 25 =		OR	X \$ 50 =	Ó	
	Independent	1 3	Minus		3_	=	×	\$ 100 =		OR	X \$ 200 =	0	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J L	\$ 180 =		OR	+ \$ 360 =		
							TO	TAL ADDIT. FFF		OR	TOTAL ADDIT.	0	
		(Column 1)		(Colur	mn 2)	(Column 3)							
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOME	Total	*	Minus	**		=)	\$ 25 =		OR	X \$ 50 =		
AMENDA	Independent	•	Minus	***		=	х	\$ 100 =		OR	X \$ 200 =		
	FIRST PRES	ENTATION OF N	ULTIPLE	DEPENDENT (CLAIM		1	\$ 180 =		OR	+ \$ 360 =		
							то	TAL ADDIT. FFF		OR	TOTAL ADDIT.		
:	If the "Highest No "If the "Highest No	umn 1 is less than th umber Previously Pa umber Previously Pa mber Previously Pal	id For" IN T	HIS SPACE is les HIS SPACE is les	s than '2 s than '3'	0', enter "20". ', enter "3".	d in the ap	propriate bo	x in cotumn	1.			